



Docket No.: G5030.0023/P023
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Masahiro Ando et al.

Application No.: 09/749,555

Confirmation No.: 5633

Filed: December 28, 2000

Art Unit: 3626

For: EXERCISE BODY MONITOR WITH
FUNCTIONS TO VERIFY INDIVIDUAL
POLICY HOLDER AND WEAR OF THE
SAME . . .

Examiner: Lena Najarian

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated May 4, 2006, please amend the above-identified U.S. patent application as follows:

Amendments to the Specification begin on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.



AMENDMENT TRANSMITTAL LETTER				Docket No. G5030.0023/P023
Application No. 09/749,555-Conf. #5633	Filing Date December 28, 2000	Examiner L. Najarian	Art Unit 3626	
Applicant(s): Masahiro Ando et al.				
EXERCISE BODY MONITOR WITH FUNCTIONS TO VERIFY INDIVIDUAL POLICY Invention: HOLDER AND WEAR OF THE SAME, AND A BUSINESS MODEL FOR A DISCOUNTED INSURANCE PREMIUM FOR POLICY HOLDER WEARING THE SAME				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	18	- 20 =		x
Independent Claims	1	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-1073 as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Dated: October 4, 2006				
Thomas J. Amico Attorney/Agent Reg. No.: 28,371				
DICKSTEIN SHAPIRO LLP 1825 Eye Street, NW Washington, DC 20006-5403 (202) 420-2232				